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DATE: December 16, 2009

PTO IDENTIFIER: Application Number 09/520,004-Conf. #7731
Patent Number

Inventor: John P. Maye et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: EDWARDS ANGELL PALMER & DODGE LLP

Dwight D. Kim, Ph.D.

PHONE: (617) 517-5588

Attorney Dkt. #: 61755(51035)

PAGES (Including Cover Sheet): 11

CONTENTS: Fee Transmittal (1 page)
Transmittal (1 page)
Notice of Appeal (1 page)
Pre-Appeal Brief Request for Review (1 page)
Remarks (5 pages)
Certificate of Transmission (1 page)
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EDWARDS ANGELL PALMER & DODGE LLP
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PTO/SB/87 (09-04)

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Application No. (if known): 09/520,004

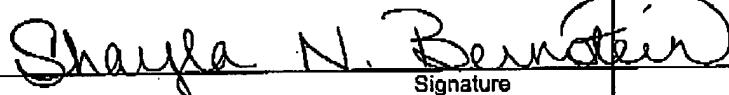
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TRANSMITTAL FORM

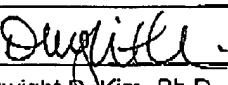
(to be used for all correspondence after initial filing)

		Application Number	09/520,004-Conf. #7731
		Filing Date	March 6, 2000
		First Named Inventor	John P. Maye
		Art Unit	1794
		Examiner Name	V. Stulii
Total Number of Pages in This Submission		Attorney Docket Number	61755(51035)

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax Cover Sheet Certificate of Transmission Pre-Appeal Brief Request for Review Remarks
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	EDWARDS ANGELL PALMER & DODGE LLP		
Signature			
Printed name	Dwight D. Kim, Ph.D.		
Date	December 16, 2009	Reg. No.	57,665

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NO. 7513 P. 4
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PTO/5B/17 (10-08)

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<i>Effective on 12/08/2004.</i> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i>		<i>Complete If Known</i>	
FEE TRANSMITTAL For FY 2009		Application Number	09/520,004-Conf. #7731
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	March 6, 2000
TOTAL AMOUNT OF PAYMENT (\$ 270.00)		First Named Inventor	John P. Maye
		Examiner Name	V. Stulii
		Art Unit	1794
		Attorney Docket No.	61755(51035)

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
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For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description							
Each claim over 20 (including Reissues)							
Each independent claim over 3 (including Reissues)							
Multiple dependent claims							
Total Claims Extra Claims Fee (\$) Fee Paid (\$)				Multiple Dependent Claims Fee (\$) Fee Paid (\$)			
- 20 or HP = <input checked="" type="checkbox"/> x _____ = _____				- 52 26 - 220 110 - 390 195			
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)							
- 3 or HP = <input checked="" type="checkbox"/> x _____ = _____							
HP = highest number of total claims paid for, if greater than 20. HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
- 100 = _____ /50 = _____ (round up to a whole number) x _____ = _____							
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 2401 Notice of appeal							

SUBMITTED BY					
Signature	<i>Dwight D. Kim</i>	Registration No. (Attorney/Agent)	57,665	Telephone	(617) 517-5588
Name (Print/Type)	Dwight D. Kim, Ph.D.			Date	December 16, 2009

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